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London	Company:	USPTO, Art Unit 3752	Phone No: (571) 272-2708
Los Angeles			
New York			
Northern Virginia	Re:	In re Patent Application of	
Orange County		Inventor: Reese et al.	
Palo Alto		Appln. No.: 10/656,002	
Sacramento		Filing Date: September 5, 2003	
San Diego		Title: SUBSTRATE HOLDER	
San Diego-North County	From:	Anthony G. Smyth	Phone No: 858.509.4007
San Francisco	User No:	15636	C/M No: 044182-0305880
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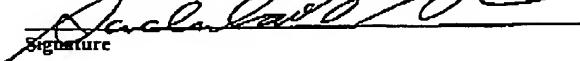
Amendment in response to outstanding Office Action mailed December 15, 2005, Substitute Drawings, Fee Transmittal, Extension of Time Request, for the above-identified application.

(Current Due Date: May 15, 2006)

CERTIFICATION UNDER 37 C.F.R. §§ 1.8 and/or 1.10*

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* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

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T-656 P.002

F-453

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PTO/SB/21 (02-04)

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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

22

Application Number

10/656,002

Filing Date

09/05/2003

First Named Inventor

Steven A. Reese

Art Unit

3752

Examiner Name

Boeckmann, Jason J.

Attorney Docket Number

044182-0305880

ENCLOSURES (Check all that apply)

Fee Transmittal Form
 (Deposit Account)
 Fee Attached

Amendment/Reply
 After Final
 Affidavits/declaration(s)

Extension of Time Request

Express Abandonment Request

Information Disclosure Statement

Certified Copy of Priority Document(s)

Response to Missing Parts/ Incomplete Application

Response to Missing Parts under 37 CFR 1.52 or 1.53

Drawing(s) 4 Replacement Sheets (Figs 1A-1B, 2, 4A-4C, 5)
 Licensing-related Papers
 Petition
 Petition to Convert to a Provisional Application
 Power of Attorney, Revocation
 Change of Correspondence Address
 Terminal Disclaimer
 Request for Refund
 CD, Number of CD(s) _____

After Allowance communication to Technology Center (TC)
 Appeal Communication to Board of Appeals and Interferences
 Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
 Proprietary Information
 Status Letter
 Other Enclosure(s) (please identify below):

Remarks

Fax Cover Sheet

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Anthony G. Smyth, Reg. No. 55,636 Pillsbury Winthrop Shaw Pittman LLP
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Signature	
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Date	May 15, 2006
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T-656 P.003/022 F-453

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PTO/SB/17 (12-04v2)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)
225.00**Complete if Known**

Application Number	10/656,002
Filing Date	September 5, 2003
First Named Inventor	STEVEN S. REESE
Examiner Name	BOECKMANN, JASON J.
Art Unit	3752
Attorney Docket No.	044182-0305880

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 033975 Deposit Account Name: PILLSBURY WINTHROP SHAW PITTMAN LLP

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FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Small Entity Fee (\$)	Fee (\$)
- 20 or HP =	x	=		50	25
HP = highest number of total claims paid for, if greater than 20.				200	100
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	360	180
- 3 or HP =	x	=		Multiple Dependent Claims	
HP = highest number of independent claims paid for, if greater than 3.				Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x 125.00	=	0.00

4. OTHER FEES

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2 month Extension of Time (Fee Code: 2252)Fees Paid (\$)225.00**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	55636	Telephone	858.509.4007
Name (Print/Type)	Anthony Smyth		Date	May 15, 2006	

This collection of information is required by 37 CFR 1.156. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 15 2006

PTO/SB/17 (12-04v2)

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FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

225.00

Complete if Known

Application Number	10/656,002
Filing Date	September 5, 2003
First Named Inventor	STEVEN S. REESE
Examiner Name	BOECKMANN, JASON J.
Art Unit	3752
Attorney Docket No.	044182-0305880

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

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Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

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Fee Description

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Multiple dependent claims

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Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

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- 100 =	/ 50 =	(round up to a whole number) x 125.00 =	0.00	

4. OTHER FEE(S)

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Other (e.g., late filing surcharge): 2 month Extension of Time (Fee Code: 2252) 225.00

SUBMITTED BY

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Name (Print/Type)	Anthony Smyth			Date	May 15, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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